

LIST OF GRANTEES (10 Grantees)					
Grantee Name	City	State	Tracking Number	BHCMIS ID	Funding Streams
AMMONOOSUC COMMUNITY HEALTH SRVS, INC.	LITTLETON	NH	H80CS005542009	010980	CH
AVIS GOODWIN COMMUNITY HEALTH CENTER	DOVER	NH	H80CS042102009	019980	CH
CITY OF MANCHESTER NEW HAMPSHIRE	MANCHESTER	NH	H80CS000022009	010130	HCH
COOS COUNTY FAMILY HEALTH SERVICES, INC.	BERLIN	NH	H80CS005082009	010850	CH
FAMILIES FIRST OF GREATER SEACOAST	PORTSMOUTH	NH	H80CS002392009	014040	HCH
HARBOR HOMES, INC	NASHUA	NH	H80CS128672009	01E00025	HCH
HEALTH FIRST FAMILY CARE CENTER, INC.	FRANKLIN	NH	H80CS002952009	014060	CH
INDIAN STREAM HEALTH CENTER	COLEBROOK	NH	H80CS066552009	0112200	CH
LAMPREY HEALTH CARE	NEWMARKET	NH	H80CS006402009	011580	CH
MANCHESTER COMMUNITY HEALTH CENTER	MANCHESTER	NH	H80CS005712009	010760	CH

TABLE 3A - Patients by Age and Gender - 2009
State - Universal - 10 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
Number of Patients				
1.	Under Age 1	920	806	1,726
2.	Age 1	545	511	1,056
3.	Age 2	513	478	991
4.	Age 3	460	401	861
5.	Age 4	398	397	795
6.	Age 5	447	425	872
7.	Age 6	389	395	784
8.	Age 7	414	401	815
9.	Age 8	403	360	763
10.	Age 9	400	357	757
11.	Age 10	403	357	760
12.	Age 11	381	386	767
13.	Age 12	380	372	752
14.	Age 13	383	368	751
15.	Age 14	391	437	828
16.	Age 15	388	534	922
17.	Age 16	396	635	1,031
18.	Age 17	356	688	1,044
19.	Age 18	347	686	1,033
20.	Age 19	283	792	1,075
Subtotal Patients (sum lines 1-20)		8,597	9,786	18,383
21.	Age 20	300	729	1,029
22.	Age 21	283	780	1,063
23.	Age 22	330	809	1,139
24.	Age 23	320	787	1,107
25.	Age 24	281	714	995
26.	Ages 25 - 29	1,402	3,369	4,771
27.	Ages 30 - 34	1,356	2,599	3,955
28.	Ages 35 - 39	1,479	2,546	4,025
29.	Ages 40 - 44	1,793	2,592	4,385
30.	Ages 45 - 49	2,016	2,814	4,830
31.	Ages 50 - 54	2,158	2,586	4,744
32.	Ages 55 - 59	1,738	2,164	3,902
33.	Ages 60 - 64	1,312	1,715	3,027
Subtotal Patients (sum lines 21-33)		14,768	24,204	38,972
34.	Ages 65 - 69	971	1,265	2,236
35.	Ages 70 - 74	666	910	1,576
36.	Ages 75 - 79	533	814	1,347
37.	Ages 80 - 84	378	686	1,064
38.	Ages 85 and over	316	809	1,125
Subtotal Patients (sum lines 34-38)		2,864	4,484	7,348
39.	Total Patients (sum lines 1-38)	26,229	38,474	64,703
% of Total		40.5%	59.5%	

TABLE 3B - Patients by Hispanic or Latino Identity / Race / Language - 2009
State - Universal - 10 Grantees

PATIENTS BY RACE	PATIENTS BY HISPANIC OR LATINO IDENTITY						
	Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
			Number	% of Total	Number	% of Total	% of Known
Number of Patients							
1. Asian	9	1,524			1,533	2.4%	2.6%
2a. Native Hawaiian	0	27			27	0.0%	0.0%
2b. Other Pacific Islander	5	34			39	0.1%	0.1%
2. Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	5	61			66	0.1%	0.1%
3. Black/African American	17	1,333			1,350	2.1%	2.3%
4. American Indian/Alaska native	4	123			127	0.2%	0.2%
5. White	1,931	52,965			54,896	84.8%	92.8%
6. More than one race	110	1,087			1,197	1.8%	2.0%
6a. Total Known (Sum lines 1+2+3+4+5+6)	2,076	57,093			59,169		
7. Unreported/Refused to report	2,216	943	2,375	3.7%	5,534	8.6%	
8. Total Patients(Sum lines 1+2+3 to 7)	4,292	58,036	2,375	3.7%	64,703	100.0%	100.0%
	<i>% of Known (a)</i>	<i>% of Known (b)</i>					
9. Total Patients	6.9%	93.1%					

PATIENTS BY LANGUAGE	Number (a)	% of Total
Number of Patients		
12. Patients best served in a language other than English	6,127	9.5%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2009
State - Universal - 10 Grantees

Characteristic		Number of Patients (a)	% of Total	% of Known		
Income as Percent of Poverty Level						
1.	100% and Below	26,133	40.4%	56.5%		
2.	101 - 150%	7,339	11.3%	15.9%		
3.	151 - 200%	4,442	6.9%	9.6%		
4.	Over 200%	8,328	12.9%	18.0%		
5.	Unknown	18,461	28.5%			
6.	Total (sum lines 1-5)	64,703	100.0%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	3,424	16,207	19,631	30.3%	
8a.	Regular Medicaid (Title XIX)	6,675	5,093	11,768	18.2%	
8b.	CHIP Medicaid	2,928	0	2,928	4.5%	
8.	Total Medicaid (Sum lines 8a+8b)	9,603	5,093	14,696	22.7%	
9.	Medicare (Title XVIII)	5	9,246	9,251	14.3%	
10a.	Other Public Insurance Non-CHIP	0	0	0	0.0%	
10b.	Other Public Insurance CHIP	523	0	523	0.8%	
10.	Total Public Insurance (Sum lines 10a+ 10b)	523	0	523	0.8%	
11.	Private Insurance	4,828	15,774	20,602	31.8%	
12.	Total (Sum Lines 7+8+9+10+11)	18,383	46,320	64,703	100.0%	
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non- Medicaid CHIP (c)	Private (d)	Total (e)
13a. Capitated Member months		0	0	0	627	627
13b. Fee-for-service Member months		0	0	418	7,967	8,385
13c. Total Member Months (Sum lines 13a+ 13b)		0	0	418	8,594	9,012
Characteristics - Special Populations			Number of Patients (a)	%		
14. Migrant (330g grantees Only)			0	0.0%		
15. Seasonal (330g grantees Only)			0	0.0%		
Migrant/Seasonal (non-330 g grantees)			192	100.0%		
16. Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)			192	100.0%		
17. Homeless Shelter (330h grantees Only)			560	14.9%		
18. Transitional (330h grantees Only)			601	16.0%		
19. Doubling Up (330h grantees Only)			758	20.2%		
20. Street (330h grantees Only)			77	2.1%		
21. Other (330h grantees Only)			172	4.6%		
22. Unknown (330h grantees Only)			39	1.0%		
Homeless (non-330 h grantees)			1,541	41.1%		
23. Total Homeless (All Grantees Report This Line)			3,748	100.0%		
24. Total School Based Health Center Patients (All Grantees Report This Line)			1,402			
25. Total Veterans (All Grantees Report this Line)			1,738			

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 10 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	28.68	86,474	
2.	General Practitioners	0.00	0	
3.	Internists	3.16	7,880	
4.	Obstetrician/Gynecologists	1.31	5,337	
5.	Pediatricians	2.98	8,395	
7.	Other Specialty Physicians	0.03	294	
8.	Total Physicians (Sum lines 1-7)	36.16	108,380	
9a.	Nurse Practitioners	26.82	71,369	
9b.	Physician Assistants	11.14	29,557	
10.	Certified Nurse Midwives	2.13	5,521	
10a.	Total Mid-Levels (Sum lines 9a-10)	40.09	106,447	
11.	Nurses	84.92	21,643	
12.	Other Medical Personnel	59.97		
13.	Laboratory Personnel	2.00		
14.	X-Ray Personnel	0.00		
15.	Total Medical Services (Sum lines 8+10a through 14)	223.14	236,470	63,110
16.	Dentists	3.28	7,496	
17.	Dental Hygienists	3.85	6,193	
18.	Dental Assistants, Aides, Techs	5.09		
19.	Total Dental Services (Sum lines 16-18)	12.22	13,689	6,915
20a.	Psychiatrists	0.00	0	
20a1.	Licensed Clinical Psychologists	0.81	1,104	
20a2.	Licensed Clinical Social Workers	2.85	2,814	
20b.	Other Licensed Mental Health Providers	1.01	1,349	
20c.	Other Mental Health Staff	1.67	1,403	
20.	Total Mental Health Services (Sum lines 20a-20c)	6.34	6,670	1,577
21.	Substance Abuse Services	3.84	2,104	626
22.	Other Professional Services	5.26	6,197	3,546
23.	Pharmacy Personnel	3.90		
24.	Case Managers	15.52	11,245	
25.	Patient/Community Education Specialists	4.30	2,424	
26.	Outreach Workers	3.69		
27.	Transportation Staff	0.66		
27a.	Eligibility Assistance Workers	21.29		
27b.	Interpretation Staff	3.16		
28.	Other Enabling Services	0.00		
29.	Total Enabling Services (Sum lines 24-28)	48.62	13,669	5,751
29a.	Other Programs/Services	19.13		
30a.	Management and Support Staff	63.23		
30b.	Fiscal and Billing Staff	41.38		
30c.	IT Staff	16.13		
30.	Total Administrative Staff (Sum lines 30a-30c)	120.74		
31.	Facility Staff	4.60		
32.	Patient Support Staff	93.08		
33.	Total Administrative & Facility (Sum lines 30-32)	218.42		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)	540.87	278,799	

Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 10 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	12.9%	5.3%	36.6%	31.0%
2.	General Practitioners	0.0%	0.0%	0.0%	0.0%
3.	Internists	1.4%	0.6%	3.3%	2.8%
4.	Obstetrician/Gynecologists	0.6%	0.2%	2.3%	1.9%
5.	Pediatricians	1.3%	0.6%	3.6%	3.0%
7.	Other Specialty Physicians	0.0%	0.0%	0.1%	0.1%
8.	Total Physicians (Sum lines 1-7)	16.2%	6.7%	45.8%	38.9%
9a.	Nurse Practitioners	12.0%	5.0%	30.2%	25.6%
9b.	Physician Assistants	5.0%	2.1%	12.5%	10.6%
10.	Certified Nurse Midwives	1.0%	0.4%	2.3%	2.0%
10a.	Total Mid-Levels (Sum lines 9a-10)	18.0%	7.4%	45.0%	38.2%
11.	Nurses	38.1%	15.7%	9.2%	7.8%
12.	Other Medical Personnel	26.9%	11.1%		
13.	Laboratory Personnel	0.9%	0.4%		
14.	X-Ray Personnel	0.0%	0.0%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	41.3%	100.0%	84.8%
16.	Dentists	26.8%	0.6%	54.8%	2.7%
17.	Dental Hygienists	31.5%	0.7%	45.2%	2.2%
18.	Dental Assistance,Aides,Techs	41.7%	0.9%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	2.3%	100.0%	4.9%
20a.	Psychiatrists	0.0%	0.0%	0.0%	0.0%
20a1.	Licensed Clinical Psychologists	12.8%	0.1%	16.6%	0.4%
20a2.	Licensed Clinical Social Workers	45.0%	0.5%	42.2%	1.0%
20b.	Other Licensed Mental Health Providers	15.9%	0.2%	20.2%	0.5%
20c.	Other Mental Health Staff	26.3%	0.3%	21.0%	0.5%
20.	Mental Health (Sum lines 20a-c)	100.0%	1.2%	100.0%	2.4%
21.	Substance Abuse Services	100.0%	0.7%	100.0%	0.8%
22.	Other Professional Services	100.0%	1.0%	100.0%	2.2%
23.	Pharmacy Personnel	100.0%	0.7%		
24.	Case Managers	31.9%	2.9%	82.3%	4.0%
25.	Patient/Community Education Specialists	8.8%	0.8%	17.7%	0.9%
26.	Outreach Workers	7.6%	0.7%		
27.	Transportation Staff	1.4%	0.1%		
27a.	Eligibility Assistance Workers	43.8%	3.9%		
27b.	Interpretation Staff	6.5%	0.6%		
28.	Other Enabling Services	0.0%	0.0%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	9.0%	100.0%	4.9%
29a.	Other Programs/Services	100.0%	3.5%		

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% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 10 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff	28.9%	11.7%		
30b.	Fiscal and Billing Staff	18.9%	7.7%		
30c.	IT Staff	7.4%	3.0%		
30.	Total Administrative Staff (Sum lines 30a-30c)	55.3%	22.3%		
31.	Facility Staff	2.1%	0.9%		
32.	Patient Support Staff	42.6%	17.2%		
33.	Total Administrative & Facility (Sum lines 30-32)	100.0%	40.4%		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%

Clinic Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding
% may not equal 100% due to rounding

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 10 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1.	Symptomatic HIV	042; 079.53	14	12	1.17
2.	Asymptomatic HIV	V08	2	2	1.00
3.	Tuberculosis	010.xx - 018.xx	21	20	1.05
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	142	128	1.11
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	3,955	2,090	1.89
6.	Chronic bronchitis and Emphysema	490.xx - 492.xx	1,869	999	1.87
Selected Other Medical Conditions					
7.	Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	102	56	1.82
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	784	548	1.43
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x;	13,457	4,417	3.05
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	3,988	1,738	2.29
11.	Hypertension	401.xx - 405.xx;	16,730	7,330	2.28
12.	Contact Dermatitis and other Eczema	692.xx	1,267	1,091	1.16
13.	Dehydration	276.5x	79	66	1.20
14.	Exposure to Heat or Cold	991.xx - 992.xx	21	20	1.05
14a.	Overweight and obesity	ICD-9 : 278.0 - 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	1,847	780	2.37
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	3,309	2,324	1.42
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	488	212	2.30
17.	Lack of Expected Normal Physiological Development (Such as delayed milestone;Failure to gain weight;Failure to thrive)-does not include sexual or mental development;Nutritional Deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x;	1,004	351	2.86

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 10 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	1,123	367	3.06
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	786	350	2.25
19a.	Tobacco Use Disorders	305.1	1,930	822	2.35
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	7,119	2,972	2.40
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81;	4,562	2,319	1.97
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	2,451	1,058	2.32
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes mental retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 300.3; 300.4; 301.13); 306.xx - 319.xx (Excluding 308.3; 309.81; 311.xx; 312.8x; 312.9x; 313.81; 314.xx)	3,662	1,943	1.88

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 10 Grantees

Service Category		Applicable ICD - 9 - CM Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	1,557	1,500	1.04
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	3,271	3,080	1.06
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	11,315	9,636	1.17
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal Diphtheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT - 4: 90633 - 90634, 90645 - 90648; 90669; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	18,215	10,624	1.71
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	13,648	13,117	1.04
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	7,370	6,674	1.10
25.	Contraceptive Management	ICD - 9: V25.xx CPT - 4: 99391 - 99393;	9,207	4,608	2.00
26.	Health Supervision of Infant or Child (ages 0 through 11)	99381 - 99383;	12,892	8,057	1.60
26a.	Childhood lead test screening (Ages 9 to 72 months)	CPT-4: 83655	929	821	1.13
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	373	145	2.57
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406 and 99407; S9075	1,612	1,018	1.58

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 10 Grantees

Service Category		Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	29	28	1.04
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	4,871	4,173	1.17
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	3,183	2,456	1.30
30.	Sealants	ADA: D1351	614	488	1.26
31.	Fluoride Treatment - adult or child	ADA: D1203, D1204, D1206	1,951	1,774	1.10
32.	III. Restorative Services	ADA: D21xx - D29xx	2,578	1,345	1.92
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	1,399	937	1.49
34.	V. Rehabilitation Services (Endo,Perio,Prosthodontics)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	496	368	1.35

TABLE 6B - Quality of Care Indicators - 2009
State - Universal - 10 Grantees

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)					
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS					
AGE		Number of Patients (a)		Percent	
1.	Less than 15 Years	0		0.0%	
2.	Ages 15 - 19	272		11.7%	
3.	Ages 20 - 24	901		38.8%	
4.	Ages 25 - 44	1,150		49.5%	
5.	Ages 45 and Over	1		0.0%	
6.	Total Patients (Sum lines 1-5)	2,324		100.0%	

SECTION B - TRIMESTER OF ENTRY INTO PRENATAL CARE					
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider	
		(a)	%	(b)	%
7.	First Trimester	1,808	77.8%	93	4.0%
8.	Second Trimester	285	12.3%	42	1.8%
9.	Third Trimester	51	2.2%	45	1.9%

SECTION C - CHILDHOOD IMMUNIZATION RATE			
Childhood Immunization Rate		Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized (b)
10.	Number of children who have received required vaccines who had their 2nd birthday during measurement year	955	826

SECTION D - PAP TEST			
Pap Test		Total Number of Female Patients 24-64 Years of Age (a)	Estimated number patients tested (b)
11.	Number of female patients aged 24-64 who had at least one PAP test performed during the measurement year or during one of the previous two years	19,412	13,025

% may not equal 100% due to rounding

The childhood immunization and Pap test rates are based on the total of the estimated number of patients tested or immunized for each health center divided by the total number patients in the applicable category (i.e., the universe) for each measure.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 10 Grantees

Total (i)								
HIV Positive Pregnant Women	0							
	-							
Section A: DELIVERIES AND BIRTH WEIGHT								
	Prenatal care patients who delivered during the year		Deliveries performed by Grantee Provider		Live Births < 1500 grams	Live Births 1500-2499 grams	Live Births >= 2500 grams	% Low and Very Low Birth Weight
By Race								
Asian (a)	43	3.5%			0	3	40	7.0%
Native Hawaiian (b1)	0	0.0%			0	0	0	-
Pacific Islander (b2)	1	0.1%			0	0	1	0.0%
Black/ African American (c)	46	3.8%			0	4	42	8.7%
American Indian/ Alaska Native (d)	2	0.2%			0	0	2	0.0%
White (e)	979	80.7%			6	52	928	5.9%
More than one race (f)	5	0.4%			0	0	5	0.0%
Race Unreported/ Refused to Report (g)	137	11.3%			0	12	126	8.7%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	1,213	100.0%			6	71	1,144	6.3%
By Hispanic/Latino Identity								
Hispanic/Latino (c1)	175	14.4%			1	10	164	6.3%
Non-Hispanic/Latino (c2)	1,038	85.6%			5	61	980	6.3%
Sub-total (Sum c1 + c2)	1,213	100.0%			6	71	1,144	6.3%
Unreported / Refused to Report Race and Ethnicity (h)	0	0.0%			0	0	0	-
Total (i)	1,213	100.0%	1,194	100.0%	6	71	1,144	6.3%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 10 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total hypertensive patients	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	118	
Native Hawaiian (b1)	5	
Pacific Islander (b2)	6	
Black/ African American (c)	135	
American Indian/ Alaska Native (d)	19	
White (e)	9,414	
More than one race (f)	5	
Race Unreported/ Refused to Report (g)	326	
Sub-total (Sum a+b1+b2+c+d+e+f+g)	10,028	
By Hispanic/Latino Identity		
Hispanic/Latino (c1)	438	
Non-Hispanic/Latino (c2)	9,590	
Sub-total (Sum c1 + c2)	10,028	
Unreported / Refused to Report Race and Ethnicity (h)	2	
Total (i)	10,030	67.3%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 10 Grantees

SECTION C: DIABETES			
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results			
	Total patients with diabetes	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 7%
By Race			
Asian (a)	71		
Native Hawaiian (b1)	4		
Pacific Islander (b2)	2		
Black/ African American (c)	72		
American Indian/ Alaska Native (d)	11		
White (e)	3,479		
More than one race (f)	5		
Race Unreported/ Refused to Report (g)	284		
Sub-total (Sum a+b1+b2+c+d+e+f+g)	3,928		
By Hispanic/Latino Identity			
Hispanic/Latino (c1)	218		
Non-Hispanic/Latino (c2)	3,710		
Sub-total (Sum c1 + c2)	3,928		
Unreported / Refused to Report Race and Ethnicity (h)	1		
Total (i)	3,929	82.4%	53.8%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 8A - Financial Costs - 2009
State - Universal - 10 Grantees

	Accrued Cost (a)	Allocation of Facility and Administration (b)	Total Cost After Allocation of Facility and Administration (c)
Financial Costs for Medical Care			
1. Medical Staff	17,719,459	10,434,445	28,153,904
2. Lab and X-ray	124,350	115,589	239,939
3. Medical/Other Direct	4,352,789	1,678,691	6,031,480
4. Total Medical Care Services (Sum lines 1-3)	22,196,598	12,228,725	34,425,323
Financial Costs for Other Clinical Services			
5. Dental	1,310,950	770,071	2,081,021
6. Mental Health	527,220	314,594	841,814
7. Substance Abuse	227,296	97,923	325,219
8a. Pharmacy not including pharmaceuticals	272,649	449,200	721,849
8b. Pharmaceuticals	911,765		911,765
9. Other Professional	325,826	209,420	535,246
10. Total Other Clinical Services (Sum lines 5-9)	3,575,706	1,841,208	5,416,914
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	803,753		803,753
11b. Transportation	58,010		58,010
11c. Outreach	159,033		159,033
11d. Patient and Community Education	352,772		352,772
11e. Eligibility Assistance	473,299		473,299
11f. Interpretation Services	257,776		257,776
11g. Other Enabling Services	0		0
11. Total Enabling Services Cost (Sum lines 11a-11g)	2,104,643	1,066,751	3,171,394
12. Other Related Services	850,720	644,248	1,494,968
13. Total Enabling and Other Services (Sum lines 11-12)	2,955,363	1,710,999	4,666,362
Overhead and Totals			
14. Facility	2,769,969		
15. Administration	13,010,963		
16. Total Overhead (Sum lines 14-15)	15,780,932		
17. Total Accrued Costs (Sum lines 4+10+13+16)	44,508,599		44,508,599
18. Value of Donated Facilities, Services and Supplies			521,369
19. Grand Total including Donations (Sum lines 17-18)			45,029,968

% may not equal 100% due to rounding

TABLE 8A - Financial Costs - 2009
State - Universal - 10 Grantees

Services		Direct Accrued Cost (a)		Cost (c)
		% of Category	% of Total	Includes Overhead** % of Total
Financial Costs for Medical Care				
1.	Medical Staff	79.8%	39.8%	63.3%
2.	Lab and X-ray	0.6%	0.3%	0.5%
3.	Medical/Other Direct	19.6%	9.8%	13.6%
4.	Total Medical Care Services (Sum lines 1-3)	100.0%	49.9%	77.3%
Financial Costs for Other Clinical Services				
5.	Dental	36.7%	2.9%	4.7%
6.	Mental Health	14.7%	1.2%	1.9%
7.	Substance Abuse	6.4%	0.5%	0.7%
8a.	Pharmacy not including pharmaceuticals	7.6%	0.6%	1.6%
8b.	Pharmaceuticals	25.5%	2.0%	2.0%
9.	Other Professional	9.1%	0.7%	1.2%
10.	Total Other Clinical Services (Sum lines 5-9)	100.0%	8.0%	12.2%
Financial Costs of Enabling and Other Program Related Services				
11a.	Case Management	27.2%	1.8%	1.8%
11b.	Transportation	2.0%	0.1%	0.1%
11c.	Outreach	5.4%	0.4%	0.4%
11d.	Patient and Community Education	11.9%	0.8%	0.8%
11e.	Eligibility Assistance	16.0%	1.1%	1.1%
11f.	Interpretation Services	8.7%	0.6%	0.6%
11g.	Other Enabling Services	0.0%	0.0%	0.0%
11.	Total Enabling Services Cost (Sum lines 11a-11g)	71.2%	4.7%	7.1%
12.	Other Related Services	28.8%	1.9%	3.4%
13.	Total Enabling and Other Services (Sum lines 11-12)	100.0%	6.6%	10.5%
Overhead and Totals				
14.	Facility	17.6%	6.2%	
15.	Administration	82.4%	29.2%	
16.	Total Overhead (Sum lines 14-15)	100.0%	35.5%	
17.	Total Accrued Costs (Sum lines 4+10+13+16)	100.0%	100.0%	100.0%
18.	Value of Donated Facilities, Services and Supplies (as % of direct costs - line 17)			1.2%

% may not equal 100% due to rounding

** Total Cost After Allocation of facility and Administration % of Total.

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 10 Grantees

Payor Category		Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	10,991,247	100.0%	28.0%	10,874,863	100.0%	42.3%	98.9%
2a.	Medicaid Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
2b.	Medicaid Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
3.	Total Medicaid (Sum lines 1+2a+2b)	10,991,247	100.0%	28.0%	10,874,863	100.0%	42.3%	98.9%
4.	Medicare Non-Managed Care	5,963,228	100.0%	15.2%	4,170,006	100.0%	16.2%	69.9%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
5b.	Medicare Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
6.	Total Medicare (Sum lines 4+5a+5b)	5,963,228	100.0%	15.2%	4,170,006	100.0%	16.2%	69.9%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	245,109	91.2%	0.6%	149,975	87.7%	0.6%	61.2%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	23,595	8.8%	0.1%	21,019	12.3%	0.1%	89.1%
9.	Total Other Public (Sum lines 7+8a+8b)	268,704	100.0%	0.7%	170,994	100.0%	0.7%	63.6%
10.	Private Non-Managed Care	10,170,317	97.8%	25.9%	7,695,623	97.7%	30.0%	75.7%
11a.	Private Managed Care (Capitated)	850	0.0%	0.0%	603	0.0%	0.0%	70.9%
11b.	Private Managed Care (fee-for-service)	233,030	2.2%	0.6%	178,195	2.3%	0.7%	76.5%
12.	Total Private (Sum lines 10+11a+11b)	10,404,197	100.0%	26.5%	7,874,421	100.0%	30.7%	75.7%
13.	Self Pay	11,659,943	100.0%	29.7%	2,599,156	100.0%	10.1%	22.3%
14.	Grand Total (Sum lines 3+6+9+12+13)	39,287,319		100.0%	25,689,440		100.0%	65.4%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 10 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	0	1,340,429		223	1,340,206	12.2%	-380,628	-3.5%
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	-	0	-
2b. Medicaid Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
3. Total Medicaid (Sum lines 1+2a+2b)	0	1,340,429	0	223	1,340,206	12.2%	-380,628	-3.5%
4. Medicare Non-Managed Care	30,711	59,827		85,238	5,300	0.1%	1,683,833	28.2%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	-	0	-
5b. Medicare Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
6. Total Medicare (Sum lines 4+5a+5b)	30,711	59,827	0	85,238	5,300	0.1%	1,683,833	28.2%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	0	0		0	0	0.0%	84,575	34.5%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0	0	0	0	-	0	-
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	0	0	0.0%	2,085	8.8%
9. Total Other Public (Sum lines 7+8a+8b)	0	0	0	0	0	0.0%	86,660	32.3%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 10 Grantees

Payor Category		Retroactive Settlements, Receipts, and Paybacks (c)					Allowances		
		Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10.	Private Non-Managed Care				0	0	0.0%	3,073,926	30.2%
11a.	Private Managed Care (Capitated)			0	0	0	0.0%	684	80.5%
11b.	Private Managed Care (fee-for-service)			0	0	0	0.0%	41,344	17.7%
12.	Total Private (Sum lines 10+11a+11b)			0	0	0	0.0%	3,115,954	29.9%
13.	Self Pay								
14.	Grand Total (Sum lines 3+6+9+12+13)	30,711	1,400,256	0	85,461	1,345,506	3.4%	4,505,819	11.5%

13. Self Pay	Sliding Discounts (e)	Bad Debt Write Off (f)
	6,085,515	1,115,761

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2009
State - Universal - 10 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	0	0.0%
1b. Community Health Center	6,477,032	91.0%
1c. Health Care for the Homeless	638,263	9.0%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	7,115,295	100.0%
1j. Capital Improvement Program Grants	0	0.0%
1. Total BPHC Grants (Sum lines 1g+1h+1i+1j)	7,115,295	100.0%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	0	0.0%
3. Other Federal Grants	221,581	13.6%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	762,583	46.8%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	643,588	39.5%
5. Total Other Federal Grants (Sum Lines 2-4a)	1,627,752	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	5,935,921	55.3%
6a. State/Local Indigent Care Programs	0	0.0%
7. Local Government Grants and Contracts	482,204	4.5%
8. Foundation/Private Grants and Contracts	4,315,130	40.2%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	10,733,255	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	926,007	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	20,402,309	

% may not equal 100% due to rounding